## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000022368 (3)

YORKCLOUD INCORPORATED

**FILED** Feb 10 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				I Indicinal the Inter-string and Additionally and	Din 11286 filif Alife 1811 ifibi
1313 SYCAMORE TERRACE BOCA RATON FL 33486		1313 SYCAMORE TERRACE BOCA RATON FL 33486			
				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				03/22/1993	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		28 1150 CYPRESS WAY		65-0398523	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		V. Commodio di Cidida Donico	Fee Required
City & State		BOLP CAS	۳.	6. Election Campaign Financing	\$5.00 May Be
23		<del>                                    </del>		Trust Fund Contribution	Added to Fees
Zip	Country	Ziji 731/81.	Country	8. This corporation owes or has paid the c	
24	25 9. Name and Address of Current		30 0217	Personal Property Tax due June 30.  10. Name and Address of New Registered	
	<del></del>	registored Agent	81 Name	IV. Hallis and Address of Not Hogisters	· Agoin
TALBOT, NEVILLE R					
	13 SYCAMORE TERRACE ICA RATON FL 33486		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
B0	CA NATUM FL 33400		83		
			84 City		85 Zip Code
11. Purcuret to the previous of Sections 607 05/2 and 607 15/8. Evide Statutes the above named corporation submits this statement for the purpose of changing its registered.					
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
	Signatoric typed or probed name of deadlessed ages		Registered Agent signature re		ID CIDECTORO III 40
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	•	L_ Office			C C C C C C C C C C C C C C C C C C C
	MALPAS, CHRISTOPHER J 1313 SYCAMORE TERRACE		1.2 NAME		ľ
STREET ADDRESS	BOCA RATON FL 33486		1.3 STREET ADDRESS		<u> </u>
CITY-ST-ZIP TITLE	D	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	SNOWDON, DAVID M		2.2 NAME		
STREET ADDRESS	1313 SYCAMORE TERRACE		2.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33486		2 4 CITY-ST-ZIP		I
TITLE	D	DELETE	3 1 TITLE		Change Addition
NAME	TALBOT, NEVILLE R	CT Severe	3.2 NAME		
STREET ADORESS	1313 SYCAMORE TERRACE		3.3 STREET ADDRESS		]
CITY-ST-ZIP	BOCA RATON FL 33486		3.4 CITY-ST-ZIP		]
TITLE	DODA IMION FE 33100	DELEVE	4.1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		·	5.2 NAME		
STREET ADORESS			5.3 STREET ADDRESS		ł
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	617016		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
2.7. 0. 2	the state of the s		· · · · · · · · · · · · · · · · · ·	A	

4. I hereby certify that the information supplied with the filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my supplement of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report is required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on no attachment with an address.